

**For Commission  
use only**

data entry \_\_\_\_\_

proofread \_\_\_\_\_

follow-up \_\_\_\_\_

**STATE OF MAINE**  
**COMMISSION ON GOVERNMENTAL ETHICS AND ELECTION PRACTICES**  
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**2006 CAMPAIGN FINANCE REPORT  
MAINE CLEAN ELECTION ACT CANDIDATES  
FOR THE LEGISLATURE**

(Please Complete ALL Entries)

Name of CANDIDATE \_\_\_\_\_

Mailing address \_\_\_\_\_

City, zip code \_\_\_\_\_

Telephone number \_\_\_\_\_ Fax \_\_\_\_\_ E-mail \_\_\_\_\_

Office Sought \_\_\_\_\_ District Number \_\_\_\_\_

CHECK IF CHANGED  
SINCE PREVIOUS  
REPORT ☐

Name of TREASURER \_\_\_\_\_

Mailing address \_\_\_\_\_

City, zip code \_\_\_\_\_

Telephone number \_\_\_\_\_ Fax \_\_\_\_\_ E-mail \_\_\_\_\_

CHECK IF CHANGED  
SINCE PREVIOUS  
REPORT ☐

**Type of Report**

**Due Date**

**Dates of Reporting Period**

- |  |                   |                                      |
|--|-------------------|--------------------------------------|
| <input type="checkbox"/> 6-Day Pre-Primary   | June 7, 2006      | Last report (if any) - June 1, 2006  |
| <input type="checkbox"/> 42-Day Post-Primary | July 25, 2006     | June 2, 2006 - July 18, 2006         |
| <input type="checkbox"/> 6-Day Pre-General   | November 1, 2006  | July 19, 2006 - October 26, 2006     |
| <input type="checkbox"/> 42-Day Post-General | December 19, 2006 | October 27, 2006 - December 12, 2006 |

☐ Amendment to: \_\_\_\_\_

☐ Other (specify): \_\_\_\_\_

☐ Check if campaign had no activity for the reporting period (no other pages are required)

I CERTIFY THAT I HAVE EXAMINED THIS REPORT AND TO THE BEST OF MY KNOWLEDGE IT IS TRUE, CORRECT AND COMPLETE.

\_\_\_\_\_  
Treasurer's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Candidate's Signature

\_\_\_\_\_  
Date

**SCHEDULE B  
EXPENDITURES**

- Enter the date, payee, expenditure type, and amount for each expenditure made during the reporting period.
- For expenditure types which require a remark, enter a description of the goods and services purchased.
- Expenditures made with a candidate's or an authorized individual's personal funds must be reimbursed within the same reporting period as the expenditure. Enter the vendor as the payee and the purchase date. Report the name of the individual who made the payment in the remarks section.
- Only enter expenditures that have actually been paid. Enter unpaid debts and obligations on Schedule D.

Expenditure Types Requiring <u>NO</u> Remark		Expenditure Types Which <u>REQUIRE</u> Remark	
PRT	Print media ads	SAL	Campaign workers' salaries
TVN	TV or cable ads, production costs	CNS	Campaign consultants
RAD	Radio ads, production costs	PRO	Other professional services
LIT	Campaign literature (printing and graphics)	EQP	Equipment
POS	Postage for U.S. Mail	FND	Fundraising events
MHS	Mail house (all services purchased)	TRV	Travel (fuel, mileage, lodging, etc.)
PHO	Phone banks, automated telephone calls	OTH	Other
FOD	Food for campaign events, volunteers		
OFF	Office rent and utilities		
WEB	Internet and e-mail		
POL	Polling and survey research		
RTA	Return of authorized MCEA funds		
RTU	Return of unauthorized MCEA funds		

DATE EXPENDITURE MADE	NAME OF EACH PAYEE	EXPENDITURE TYPE (use code from above)	REMARK (if the expenditure type requires a remark, describe all goods and services purchased)	AMOUNT

**Total expenditures (this page only) ⇒**  
**(combined totals from all Schedule B pages must be listed on Schedule F, line 5)**

**SCHEDULE D  
UNPAID DEBTS AND OBLIGATIONS**

- List any debts or obligations that are unpaid at the close of this period (even if included in earlier reports).
- If the campaign has not received a bill for goods or services or a credit card bill, contact the vendor or credit card company to obtain the amount owed.
- If it is impossible to verify the amount of the debt, enter an estimated amount and indicate that the amount is estimated in the purpose section.
- Report actual payments to vendors on Schedule B.

DATE OBLIGATION INCURRED	CREDITOR'S NAME AND ADDRESS	PURPOSE	AMOUNT

**Total unpaid debts and obligations (this page only) ⇒**  
*(combined totals from all Schedule D pages must be listed on Schedule F, line 9)*

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**SCHEDULE E**  
**CAMPAIGN EQUIPMENT/PROPERTY INVENTORY**

**PART I - ONGOING INVENTORY OF CAMPAIGN PROPERTY**

- List equipment or property that the campaign owned at the end of the reporting period and that may be converted to the candidate's personal use, such as a computer, telephone/fax, photocopier, etc.
- Do not list signs, stationery, campaign literature, and other goods which have value only to the campaign.

DATE PURCHASED	DESCRIPTION OF EQUIPMENT OR PROPERTY	PURCHASE PRICE	FAIR MARKET VALUE (at close of this reporting period)
Total estimated value of campaign property at close of this period ⇒			

**PART II – SALES OF CAMPAIGN PROPERTY THIS PERIOD**

- List all equipment or property from Part I that was sold during this reporting period.

DATE SOLD	NAME AND ADDRESS OF PURCHASER	DESCRIPTION OF PROPERTY	SALE PRICE (if sold this period)
Total proceeds from equipment/property sales this period ⇒			Enter on Schedule F, line 3

CANDIDATE'S FULL NAME

DATE SUBMITTED

**SCHEDULE F  
SUMMARY SECTION  
(MAINE CLEAN ELECTION ACT CANDIDATES)**

This page is required for all candidates except those checking the no-activity box on the cover page of the report. The cash balance on line 6 must match the cash balance in the campaign's bank account as of the last day of this reporting period.

**CASH ACTIVITY**

- |  |   |
|--|---|
| <b>1. CASH BALANCE FROM LAST REPORT (if any)</b>                                   |   |
| <b>2. MAINE CLEAN ELECTION ACT FUNDS RECEIVED THIS PERIOD (see payment letter)</b> | + |
| <b>3. SALE OF CAMPAIGN PROPERTY THIS PERIOD (Schedule E, Part II)</b>              | + |
| <b>4. OTHER CASH RECEIPTS THIS PERIOD (interest, etc.)</b>                         | + |
| <b>5. MINUS TOTAL EXPENDITURES THIS PERIOD (total of all Schedule B pages)</b>     | - |
| <b>6. CASH BALANCE AT CLOSE OF PERIOD (lines 1 + 2 + 3 + 4 - 5)</b>                | = |
|  |   |
| <b>7. CASH NOT AUTHORIZED TO SPEND (see payment letter)</b>                        |   |
| <b>8. CASH AUTHORIZED TO SPEND (line 6 - 7)</b>                                    |   |

**OTHER ACTIVITY THIS REPORTING PERIOD**

- |  |  |
|--|--|
| <b>9. TOTAL UNPAID DEBTS AT CLOSE OF PERIOD (total all Schedule D pages)</b> |  |
|--|--|